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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400067352 (2) TOWNHOUSE INSURANCE COMPANY						
indipal Place o	f Business	Mailing Address			901()	
260 GLENRIDG KEY BISCAYNI		260 GLENRIDGE RO KEY BISCAYNE FL	· · · ·			
				 Date Incorporated or Qualified 09/09/1994 	3a. Date of Last 1 11/22/19	•
Principal Plac	e of Business	2a. Mailing Address			-0592410	Applied For Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional
City & State		City & State		6. Election Campaign Financing	\$5.0	Required 00 May Be
Zφ	Gountry	Zφ	Country	Trust Fund Contribution 8. This corporation has liability for in	ntançiible tax under s	ed to Fees 199.032,
	9. Name and Address of Curre	29 Sent Registered Agent	30]	Florida Statutes Yes 10. Name and Address of New Re		
			81 Name	10' Manie Blio Woolses of Mem M	egistered Agent	
irl, Henf 2 002 gl e	NRIDGE ROAD		1260	dress (BO. Box Number is Not Aceptable)	ө)	
KEY BISC	AYNE FL 33149		83 84 City		Jan La	
					85 Z	
familiar with, NATURE	and accept the obligations of, Sec	tion 607.0505, Florida Statute	utes, the above-named corporation's boxes.	oration submits this statement for the purp ard of directors. I hereby accept the appo	<u>FL </u>	ip Code registered offic d agent. I am
familiar with,	and accept the obligations of, Soc	tion 607.0505, Florida Statute	utes, the above-named corpo	ard of directors. Thereby accept the appo	DOSE OF CHANGING ITS INTERPORT OF THE COMMENT OF TH	registered offici d agent. I am DRS IN 12
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SIGNATURE:

GNATURE AND TYPED OF PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/96 (305)365-1855
Date Date Proper